

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 80 / 133

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Americas Health Insurance Plans PAC (AHIP PAC)

A.

Full Name (Last, First, Middle Initial)

Stephan Roker

Mailing Address 25 Cameron Ct

City

Exton

State

PA

Zip Code

19341-2371

FEC ID number of contributing
federal political committee.

C

Name of Employer
Independence Blue Cross

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 1 / 2 0 0 9

Transaction ID: b13692b2ddac4ad9762

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

James Roosevelt, Jr.

Mailing Address 705 Mount Auburn Street

City

Watertown

State

MA

Zip Code

02472-1508

FEC ID number of contributing
federal political committee.

C

Name of Employer
Tufts Health Plan

Occupation

President and CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 0 / 2 0 0 9

Transaction ID: c66db1d4c4117773946

Amount of Each Receipt this Period

2000.00

C.

Full Name (Last, First, Middle Initial)

Lisa Shreve

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City

Washington

State

DC

Zip Code

20004

FEC ID number of contributing
federal political committee.

C

Name of Employer
America's Health Insurance
Plans

Occupation

Senior Vice President, Professional Pr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 3 / 2 0 0 9

Transaction ID: 110311-49

Amount of Each Receipt this Period

41.67

SUBTOTAL of Receipts This Page (optional)

2291.67

TOTAL This Period (last page this line number only)